




PTO/SB/22 (08-03)

| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>  |            | Docket Number (Optional)<br>100112-000800US |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
|--|------------|---|--------------|------------|-------------------------|--|---|-------|------|--------------|---|-------|-------|----------|---|--------|-------|----------|--|--------|-------|----------|--|--------|--------|----------|
| <b>FY 2005</b>   |            |   |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| Application Number 10/680,406  |            | Filed 10/8/2003                             |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| For ZIMLIN   |            |   |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| Art Unit 2835  |            | Examiner EDWARDS, Anthony Q.                |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired):</p> <table><thead><tr><th></th><th><u>Fee</u></th><th><u>Small Entity Fee</u></th><th></th></tr></thead><tbody><tr><td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td><td>\$120</td><td>\$60</td><td>\$ <u>60</u></td></tr><tr><td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td><td>\$450</td><td>\$225</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td><td>\$1020</td><td>\$510</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td><td>\$1590</td><td>\$795</td><td>\$ _____</td></tr><tr><td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td><td>\$2160</td><td>\$1080</td><td>\$ _____</td></tr></tbody></table> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any other fees which may be required, or credit any overpayment, to Deposit Account Number 50-3000. I have enclosed a duplicate copy of this sheet.</p> <p><b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Proved credit card information and authorization on PTO-2038.</b></p> <p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71<br/>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record.. Registration No. 35,809</p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).</p> <p>Registration number if acting under 37 CFR 1.34(a). _____</p> <p><br/>Signature<br/>Charles J. Kulas<br/>Typed or printed name</p> <p>September 1, 2005<br/>Date<br/>650-842-0300<br/>Telephone Number</p> <p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input checked="" type="checkbox"/> *Total of 1 forms are submitted.</p> |            |   |              | <u>Fee</u> | <u>Small Entity Fee</u> |  | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$120 | \$60 | \$ <u>60</u> | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$450 | \$225 | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1020 | \$510 | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1590 | \$795 | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2160 | \$1080 | \$ _____ |
|  | <u>Fee</u> | <u>Small Entity Fee</u>                     |              |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120      | \$60  | \$ <u>60</u> |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$450      | \$225                                       | \$ _____     |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1020     | \$510                                       | \$ _____     |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$1590     | \$795                                       | \$ _____     |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$2160     | \$1080                                      | \$ _____     |            |                         |  |   |       |      |              |   |       |       |          |   |        |       |          |  |        |       |          |  |        |        |          |

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